

Vaccine hesitancy linked to previous experiences of discrimination in healthcare staff

July 28 2021



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A new study from researchers at King's has explored how COVID-19 related inequalities experienced by healthcare professionals from racial

and ethnic minority backgrounds mirror the inequalities they experience in the wider health system.

The research, published in *Ethnicity and Health*, was designed to better understand why the uptake of the [vaccine](#) against COVID-19 was lower among [healthcare professionals](#) from racial and ethnic [minority](#) groups, and to inform initiatives that enhance uptake.

The study took the form of 25 semi-structured interviews conducted between October 2020 and January 2021 and included the opinions of professionals from different racial and [ethnic backgrounds](#) and at all levels of seniority, including senior management.

The findings highlighted that vaccine concerns were expressed by different participants, irrespective of their racial or ethnic backgrounds, including those identified as White British. In racial and ethnic minority staff, however, vaccine concerns and hesitancy were influenced more by perceptions of institutional and structural discrimination. In these groups, fear and suspicion of being pressured (or forced) by their workplace to be vaccinated, sat alongside reports of racial injustices in vaccine development and testing, religious and ethical concerns about the vaccines, and issues concerning the legitimacy and accessibility of vaccine messaging.

The study concludes by acknowledging that efforts to improve vaccination uptake among racial and ethnic minority healthcare staff will be undermined without explicit recognition of the power of current (and historical) societal processes and structures that have discriminated against and marginalized communities.

"Our findings highlight the impact of past and ongoing discrimination on the likelihood of racially minoritised groups being able to trust in the vaccine. Community-led and engaged approaches are key but they must

be supported by commitments to address fundamental causes of COVID-19 inequalities rather than laying responsibility on those most affected," says Dr. Charlotte Woodhead, lead author from King's IoPPN.

Dr. Juliana Onwumere, another lead author of the study from King's IoPPN said, "In racial or ethnic minority healthcare professionals, a decision to accept a COVID 19 vaccine offer, with the intention of protecting their own health and that of other groups, including patients, colleagues, and their own families, is not straightforward. The urgency of unpicking key influencing factors, including racism and overall mistrust in public institutions, must not be underestimated."

This paper forms part of the study which is an ongoing investigation into racial and ethnic inequalities experienced by [healthcare](#) practitioners from across England. The findings from TIDES are reported directly to [policy makers](#), and are used to create new and innovative training and intervention resources for NHS staff across the country.

More information: Charlotte Woodhead et al, Race, ethnicity and COVID-19 vaccination: a qualitative study of UK healthcare staff, *Ethnicity & Health* (2021). [DOI: 10.1080/13557858.2021.1936464](https://doi.org/10.1080/13557858.2021.1936464)

Provided by King's College London

Citation: Vaccine hesitancy linked to previous experiences of discrimination in healthcare staff (2021, July 28) retrieved 8 May 2023 from <https://medicalxpress.com/news/2021-07-vaccine-hesitancy-linked-previous-discrimination.html>

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